Rev. 06/2006



## State of Idaho

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\_\_\_Page(s) Page\_\_ \_\_of\_\_\_ THIS SPACE FOR OFFICE USE ONLY

03 JAM 25 PM STATE OF ID!

Ben Ysursa Secretary of State

(Type or print clearly in black ink)

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

See instructions at bottom of page		- 1		
Lobbyist's name and permanent business address	Date prepared	Period cov	ered	
Lucas Braden 105 N. 1st Street Coew d'Alene, IO 83814	12-31-07	(Mo.)	year endi	ng (Yr.)
Coed comerc,		12	31	2007

LOBBYIST REPORT FORM

Item 1	Totals of all reportab	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.							
Category of Expenditure Reimbursed Personal Living and Travel		*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
	Pertaining to Lobbying Activity Not Have to be Reported	All Employers	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4			
Entertair Food and	nment d Refreshment	s 270°9	s 270°9	\$	\$	\$			
Living A	ccommodations	MA	NA						
Advertis	ing	42215	42215						
Travel		1/800	11860						
Telepho	ne	21576	215 96						
Other Ex	kpenses or Services	4373 (postup)	(75/mg)						
	Total	\$ 107055	\$ 107053	\$	\$	\$			

\*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1.

Ite	em	The totals of	he totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials.					
	2	Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group			
			1/2					
			N/A					

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1	Coew d'Alere Chamber of Commerce 105 N' 1st Street, Coes d'Alene IB 83.
Filing deadline: Annual report is due on January 31st.  Executive Lobbyist semi-annual report due July 31st.	No. 2	-
TO BE FILED WITH:  Ben Ysursa  Secretary of State	No. 3	
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 4	

Item 4						er in the nature of contributions of or for or on behalf of any Legislate			
				me of l	me of Legislator, Public or Executive Official Receiving or Benefiting				
			43,73	Postag	ge				
Item 5	or Ho	use Bill,	Resolution or other	ion, the number of the Senate legislative activity in which		LEGISLATIVE SUB			
Subject (from t	Code	Bill, Re	as supporting or or solution or Other ve Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, municipal Government, special districts Government, state	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)	
Item 6	con	tract bid		ecision, procurement, incial services agreement or opposing.	El (El	DERTIFICATION: I hereby certify the correct statement in accordance with S subservables and signature  The Land Land Land Land Land Land Land Land			
					E	mployer No. 3 signature		Date	
					J	mployer No. 4 signature		Date	